FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076 Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Informat	ion															
Name and Mailing Address of the control of the	f Respondent															
Oxford County Telephone and Telegraph 41 State Street, 10th Floor Albany, NY 12207												Check here if this is a change of address.				
2. Year Report Filed 2018	3. Reportin Period C 12/3	overed by Re	ling Date of Pa port)	ay		4. Number of Full-Time Employees during Selected Reporting Period (check one): a. Fewer than 16 (complete Sections I, IV, and V only) b. 16 or more (complete all sections)										
SECTION II - Full-Time Employ	/ees.															
Job Categories								nber of Emplo loyees in only)			Market Control			
								Race/Ethnicity	y							
		spanic or Latino					Not-Hispanic or Latino									
					Ma	ale						Columns A - N				
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races		
	А	В	С	D	E	F	G	н	ı	J	к	L.	М	N	0	
Executive/Senior Level Officials and Managers	1.1														0	
First/Mid-Level Officials and Managers	1.2														0	
Professionals	2														0	
Technicians	3														0	
Sales Workers	4														0	
Administrative Support Workers	5							·							0	
Craft Workers	6														0	
Operatives	7														0	
Laborers and Helpers	8											:			0	
Service Workers	9														0	
TOTAL	10 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
PREVIOUS YEAR TOTAL	11														0	

SECTION III - Part-Time Emplo	yoos.	Number of Employees															
1-1	-	(Report employees in only one category) Race/Ethnicity															
Job Categories		Hispanic or Latino		Not-Hispanic or Latino													
	L			Male									Female				
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawailan or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races			
	А	В	С	D	E	F	G	н	I	J	к	L	М	N	0		
Executive/Senior Level Officials and Managers	1.1														0		
First/Mid-Level Officials and Managers	1.2														0		
Professionals	2														0		
Technicians	3														0		
Sales Workers	4														0		
Administrative Support Workers	5														0		
Craft Workers	6														0		
Operatives	7														0		
Laborers and Helpers	8														0		
Service Workers	9														0		
TOTAL	10 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
PREVIOUS YEAR TOTAL	11														0		
SECTION IV - Report of Discri	nination Com	olaints Pursua	ant to 47 CFI	R 22.321, 23.5	55, 90.168, 10 ⁻	1.4, and 101	.311.										
This is to advise the company before an This is to advise the	y body having o Commission t	competent juris hat the followir	sdiction in suc na complaints	ch matters dur alleging viola	ing the calend ations of the pr	lar year cove ovisions of a	red by this rep ny equal emp	oort. loyment oppor	tunity statute	e have been fi	led against this	s company.					
(Attach a list indical	ling parties invo	lved, date filed	d, courts or ag	gencies before	e which the ma	atter has bee	n heard, file n	umber or othe	r designatior	n, and current	status or dispo	osition.					
SECTION V - Certification I certify that to the best of my known	owledge, inform	nation, and bel	ief, all statem	ents in this re	port are true a	nd correct.											
	yped or Printed					Signature	Signature						Telephone No.				
	Anthony	Lievano	S	···	(518) 694-8716 WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND										E (OCATION		
Title of Person Signing Regulatory Compli	ance Ana	lyst		OF ANY ST	FALSE STAT ATION LICEN	EMENTS M SE OR CON	ALLE ON THIS STRUCTION	PERMIT (47 L	PUNISHABL J.S.C. 312 (A	L BY FINE AI A)(1) AND/OR	ND/OR IMPRIS FORFEITURI	5UNMENT (E (47 U.S.C.	18 U.S.C. 100 503).) AND/OR F	EVOCATION		